

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NEW PAC

ADDRESS (number and street)

P.O. BOX 7480

Check if different
than previously
reported. (ACC)

VISALIA

CA

93290

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00398750

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

CA

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Nunes, Toni, Dian, ,

Type or Print Name of Treasurer

Signature of Treasurer

Nunes, Toni, Dian, ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NEW PAC

Report Covering the Period:

From:

| | | | | |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 10 | | 20 | | 2016 |

To:

| | | | | |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 11 | | 28 | | 2016 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | | | | | | | | |
|--|--|-----------------------------------|---|---|---|------|--|-----------|--|--|--|--|-----------|--|--|--|--|
| 6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table> | Y | Y | Y | Y | Y | 2016 | | | | | | <table><tr><td colspan="5">233702.81</td></tr></table> | 233702.81 | | | | |
| Y | Y | Y | Y | Y | | | | | | | | | | | | | |
| 2016 | | | | | | | | | | | | | | | | | |
| 233702.81 | | | | | | | | | | | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period..... | <table><tr><td colspan="5">238353.16</td></tr></table> | 238353.16 | | | | | | | | | | | | | | | |
| 238353.16 | | | | | | | | | | | | | | | | | |
| (c) Total Receipts (from Line 19) | <table><tr><td colspan="5">26000.00</td></tr></table> | 26000.00 | | | | | <table><tr><td colspan="5">378621.43</td></tr></table> | 378621.43 | | | | | | | | | |
| 26000.00 | | | | | | | | | | | | | | | | | |
| 378621.43 | | | | | | | | | | | | | | | | | |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <table><tr><td colspan="5">264353.16</td></tr></table> | 264353.16 | | | | | <table><tr><td colspan="5">612324.24</td></tr></table> | 612324.24 | | | | | | | | | |
| 264353.16 | | | | | | | | | | | | | | | | | |
| 612324.24 | | | | | | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | | | | | |
| 7. Total Disbursements (from Line 31)..... | <table><tr><td colspan="5">37457.07</td></tr></table> | 37457.07 | | | | | <table><tr><td colspan="5">385428.15</td></tr></table> | 385428.15 | | | | | | | | | |
| 37457.07 | | | | | | | | | | | | | | | | | |
| 385428.15 | | | | | | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <table><tr><td colspan="5">226896.09</td></tr></table> | 226896.09 | | | | | <table><tr><td colspan="5">226896.09</td></tr></table> | 226896.09 | | | | | | | | | |
| 226896.09 | | | | | | | | | | | | | | | | | |
| 226896.09 | | | | | | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | | | | | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <table><tr><td colspan="5">0.00</td></tr></table> | 0.00 | | | | | | | | | | | | | | | |
| 0.00 | | | | | | | | | | | | | | | | | |
| <hr/> | | | | | | | | | | | | | | | | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <table><tr><td colspan="5">0.00</td></tr></table> | 0.00 | | | | | | | | | | | | | | | |
| 0.00 | | | | | | | | | | | | | | | | | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

NEW PAC

Report Covering the Period:

From:

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10 | | 20 | | 2016 |

To:

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11 | | 28 | | 2016 |

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

500.00

43700.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

500.00

43700.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

25000.00

321064.21

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

25500.00

364764.21

12. Transfers From Affiliated/Other

Party Committees.....

0.00

11057.22

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

300.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

500.00

2500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

26000.00

378621.43

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

26000.00

378621.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 14457.07 | 208928.15 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 14457.07 | 208928.15 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 23000.00 | 156500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 20000.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 37457.07 | 385428.15 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 37457.07 | 385428.15 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 25500.00 | 364764.21 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 25500.00 | 364764.21 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 14457.07 | 208928.15 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 300.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 14457.07 | 208628.15 |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 19

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMPSON, STEPHEN M., , ,

Mailing Address P.O. BOX 586

City
ARLINGTONState
VAZip Code
22216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JEFFERSON WATERMAN INTERNATIONOccupation (for Individual)
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 21 | / | 2016 |

Transaction ID : SA11Al.10085

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 19

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AETNA INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 F STREET, N.W.
SUITE 350

City
WASHINGTON

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C C00181826

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2016**

Transaction ID : SA11C.10084

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

Mailing Address 11921 FREEDOM DRIVE
SUITE 1100

City
RESTON

State
VA

Zip Code
20190

FEC ID number of contributing
federal political committee.

C C00447565

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / **07** / **2016**

Transaction ID : SA11C.10081

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G Street NW

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C C00194746

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **07** / **2016**

Transaction ID : SA11C.10083

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 19

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HDR, INC. PAC

Mailing Address 8404 INDIAN HILLS DRIVE

City
OMAHA

State
NE

Zip Code
68114

FEC ID number of contributing
federal political committee.

C C00103903

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2016**

Transaction ID : SA11C.10076

Amount of Each Receipt this Period

5000.00

☐ Memo Item

DATED: 10/5/16 RE'CVD: 11/1/16

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRUDENTIAL FINANCIAL INC STATE AND FEDERAL POLITICAL ACTION COMMITTEE AKA PRUDENTIAL STAT

Mailing Address 751 BROAD STREET
14TH FLOOR

City

NEWARK

State

NJ

Zip Code

07102

FEC ID number of contributing
federal political committee.

C C00493304

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2016**

Transaction ID : SA11C.10078

Amount of Each Receipt this Period

5000.00

☐ Memo Item

DATED: 6/24/16 REC'VD: 11/1/16

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINE INSTITUTE PAC

Mailing Address 700 13TH STREET NW
SUITE 600

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00065219

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **01** / **2016**

Transaction ID : SA11C.10074

Amount of Each Receipt this Period

5000.00

☐ Memo Item

DATED: 10/24/16 REC'VD: 11/1/16

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00

25000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 19
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHERIFF SCOTT JONES FOR CONGRESS

Mailing Address 2150 RIVER PLAZA DR. #150

City

SACRAMENTO

State

CA

Zip Code

95833

FEC ID number of contributing
federal political committee.

C

C00592113

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : SA16.10079

Amount of Each Receipt this Period

500.00

☐ Memo Item

REFUND OF CONTRIBUTION MADE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

TOTAL This Period (last page this line number only)..... ►

500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City
PALANTINEState
ILZip Code
60094Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 07 | | | 2016 | | | | | |

FEC Identification Number

C

Transaction ID : SB21B.10087

Amount of Each Disbursement this Period

6958.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 07 | | | 2016 | | | | | |

FEC Identification Number

C

Transaction ID : SB21B.10087

Amount of Each Disbursement this Period

218.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SCHNEIDER'S OF CAPITOL HILL

Mailing Address 300 MASSACHUSETTS AVENUE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/BEV

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 11 | | | 07 | | | 2016 | | | | | |

FEC Identification Number

C

Transaction ID : SB21B.10087

Amount of Each Disbursement this Period

2876.93

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6958.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. VINTAGE PRESS

Mailing Address 216 N WILLIS STREET

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV/ROOM USAGE

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10087

Amount of Each Disbursement this Period

[REDACTED] 1314.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THE VILLAGE PUB

Mailing Address 2967 WOODSIDE RD

City
WOODSIDEState
CAZip Code
94062Purpose of Disbursement
PAC FUNDRAISING EXP; ROOM USAGE

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10087

Amount of Each Disbursement this Period

[REDACTED] 1526.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MONTAGE LAGUNA BEACH

Mailing Address 30801 SO COAST HWY

City
LAGUNA BEACHState
CAZip Code
92651Purpose of Disbursement
PAC FUNDRAISING EXP: CATERING/FOOD/BEV

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10087

Amount of Each Disbursement this Period

[REDACTED] 471.91

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

| | |
|------------|------|
| [REDACTED] | 0.00 |
| [REDACTED] | |

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City
PALANTINEState
ILZip Code
60094Purpose of Disbursement
OFFICE EXP: COMMUNICATIONS & POSTAGE EXP

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10100

Amount of Each Disbursement this Period

68.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T BILLING

Mailing Address P.O. BOX 5014

City
CAROL STREAMState
ILZip Code
60197Purpose of Disbursement
OFFICE EXP: COMMUNICATIONS

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10100

Amount of Each Disbursement this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City
PALANTINEState
ILZip Code
60094Purpose of Disbursement
TRAVEL EXP: TAXI FARE (BALANCE UNDER REPORT LIMIT)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10100

Amount of Each Disbursement this Period

285.26

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

354.06

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. UBER, INC

Mailing Address 405 HOWARD STREET

City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
TRAVEL: TAXI FARE

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10103

Amount of Each Disbursement this Period

151.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City
PALANTINEState
ILZip Code
60094Purpose of Disbursement
TRAVEL EXP: HOTEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10105

Amount of Each Disbursement this Period

1715.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HYATT REGENCY

Mailing Address P.O. BOX 843977

City
DALLASState
TXZip Code
75284Purpose of Disbursement
TRAVEL EXP: HOTEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 7 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10105

Amount of Each Disbursement this Period

535.18

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1715.87

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. MARRIOTT HOTEL

Mailing Address 5855 W CENTURY BLVD

City
LOS ANGELESState
CAZip Code
90045Purpose of Disbursement
TRAVEL: HOTEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | 0 | 7 | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10105

Amount of Each Disbursement this Period

685.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TIVOLI HOTEL

Mailing Address RUA JULIO CESAR MACHADO

City
LISBOA, PORTUGALState
ZZZip Code
00000Purpose of Disbursement
TRAVEL EXP: HOTEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | 0 | 7 | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10105

Amount of Each Disbursement this Period

494.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICES - CREDIT CARD

Mailing Address P.O. BOX 94014

City
PALANTINEState
ILZip Code
60094Purpose of Disbursement
TRAVEL EXP: MISC MEALS (UNDER REPORT LIMIT)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | 0 | 7 | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10111

Amount of Each Disbursement this Period

367.34

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

367.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. HENDERSON, CLARISSA N, , ,

Mailing Address P.O. Box 7474

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
TRAVEL EXP: MILAGE REIMBURSEMENT

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 0 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10111

Amount of Each Disbursement this Period

99.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HENDERSON, CLARISSA N, , ,

Mailing Address P.O. Box 7474

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
CONSULTING: OFFICE MANAGEMENT

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 0 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10112

Amount of Each Disbursement this Period

2250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HENDERSON, CLARISSA N, , ,

Mailing Address P.O. Box 7474

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
TRAVEL: MILAGE

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 8 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C

Transaction ID : SB21B.10066

Amount of Each Disbursement this Period

302.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2652.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 19

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. HENDERSON, CLARISSA N, , ,

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 6 | | |

Mailing Address P.O. Box 7474

City
VISALIAState
CAZip Code
93291Purpose of Disbursement
TRAVEL: MEALS (UNDER REPORT LIMIT)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10067

Amount of Each Disbursement this Period

56.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHANNON, CAITLIN, , ,

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 6 | | |

Mailing Address 201 I STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
CONSULTING: PAC FUNDRAISING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10065

Amount of Each Disbursement this Period

2250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SULLENGER, KAPIOLANI J, , ,

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | D | D | D | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | 1 | 4 | | 2 | 0 | 1 | 6 | | |

Mailing Address 2958 TEMPLETON RD

City
TEMPLETONState
CAZip Code
93465Purpose of Disbursement
CONTRACT LABOR: MAILING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.10086

Amount of Each Disbursement this Period

103.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2409.13

TOTAL This Period (last page this line number only)..... ►

14457.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 19

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. BILL SHUSTER FOR CONGRESS

Mailing Address PO BOX 27

City
HOLLIDAYSBURGHState
PAZip Code
16648Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

SHUSTER, WILLIAM MR., , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 09

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 8 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00364935

Transaction ID : SB23.10072

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BRIAN MAST FOR CONGRESS

Mailing Address 2600 S DOUGLAS RD STE 900

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

MAST, BRIAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL

District: 18

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 5 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00579896

Transaction ID : SB23.10060

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COMSTOCK FOR CONGRESS

Mailing Address PO BOX 71596

City
RICHMONDState
VAZip Code
23255Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

COMSTOCK, BARBARA J, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: VA

District: 10

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | | 0 | 2 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00554261

Transaction ID : SB23.10080

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

9000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 19

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. MCSALLY FOR CONGRESS

Mailing Address PO BOX 19128

City
TUCSONState
AZZip Code
85731Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

MCSALLY, MARTHA E, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: AZ

District: 02

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 2 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00512236**Transaction ID : SB23.10068**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROS-LEHTINEN FOR CONGRESS

Mailing Address PO BOX 522784

City
MIAMIState
FLZip Code
33152Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

ROS-LEHTINEN, ILEANA THE HON., , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: FL

District: 27

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 | | 0 | 2 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00280537**Transaction ID : SB23.10069**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SMUCKER FOR CONGRESSMailing Address 548 STEEL WAY
PO BOX 7066City
LANCASTERState
PAZip Code
17604Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

SMUCKER, LLOYD K, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: PA

District: 16

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | | 2 | 1 | | | 2 | 0 | 1 | 6 | | |

FEC Identification Number

C C00599464**Transaction ID : SB23.10058**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 19

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NEW PAC

Full Name (Last, First, Middle Initial)

A. TARKANIAN FOR CONGRESS

Mailing Address 3008 CAMPBELL CIRCLE

City
LAS VEGASState
NVZip Code
89107Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

TARKANIAN, DANNY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: NV

District: 04

Date of Disbursement

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10 | | 21 | | 2016 |

FEC Identification Number

C C00582320**Transaction ID : SB23.10059**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2000.00

TOTAL This Period (last page this line number only).....▶

23000.00